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APPLICATION NUMBER FILING/RECEIPT DATE FIRST NAMED APPLICANT ATTORNEY DOCKET NO./TITLE 09/229.229 01/12/99 WAHL G

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ANTOINETTE F KONSKI MORRISON & FOERSTER 755 PAGE MILL ROAD PALO ALTO CA 94304-1018

DATE MAILED:

## NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required/items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small.

entity in compliance with 37 CFR 1.27, or ☑ to avoid abandonment.	•			this NOTIC
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Applicant must either submit the addit	dent claim surcharge. tional claim fees or cancel addition	al claims for which fe	ees are due	
<ul> <li>☑ 3. The oath or declaration:</li> <li>☑ is missing or unexecuted.</li> <li>☐ does not cover the newly submitted</li> <li>☐ does not identify the application to does not include the city and state An oath or declaration in compliance we the above Application Number and Filir</li> </ul>	d items. which it applies. or foreign country of applicant's re- ith 37 CFB 1, 63, including resider	Gidongo		cation by
<ul> <li>4. The signature(s) to the oath or declarat</li> <li>1.43 or 1.47.</li> <li>A properly signed oath or declaration in</li> </ul>	tion is/are by a person other than in			R 1.42,
5. The signature of the following joint inven	required.  ntor(s) is missing from the oath or c	declaration:		
An oath or declaration compliance winventor(s), identifying this application of the inventor(s), identifying this application of the inventor	to under a server application number a se your check was returned without the cause your check was returned with security and security	ind Filing Date; is required to payment (37 CFR 1 ithout payment.	quired. .21(m)).	
9. OTHER:	<del></del>	BEST AVA	ALABLE CO	OPY
Direct the reply and any questions about this n	notice to "Attention: Box Missing Pa	arts."		

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